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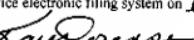
28863 7590 03/25/2010

**SHJUMAKER & SIEFFERT, P. A.**  
1625 RADIO DRIVE  
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WOODBURY, MN 55125

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## CERTIFICATE UNDER 37 CFR 1.8

I hereby certify that this correspondence is being transmitted via the United States Patent and Trademark Office electronic filing system on 6/25/2010

By: 

Name: Karen Sorenson

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/731,302	12/08/2000	Steven R. Cohen	1104-013US01	2992

TITLE OF INVENTION: PARTIALLY RESORBABLE CONNECTIVE TISSUE DISTRACTION DEVICES AND TECHNIQUES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/25/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAMANA, ANURADHA	3775	606-053000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rcv 03-02 or more recent) attached. Use of a Customer Number is required.
2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1. Shjumaker & Sieffert, P.A.  
2. \_\_\_\_\_  
3. \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

*Macropore*

## (B) RESIDENCE: (CITY AND STATE OR COUNTRY)

*San Diego, California*

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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- Issue Fee  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1778 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Kari Buttingale*

Date June 25, 2010

Typed or printed name

*Kari H. Buttingale*

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